

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
McHenry for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Andrew Brincefield
 Mailing Address 8904 Magnolia Heights Court

City	State	Zip Code
Charlotte	NC	28270-0694

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Consolidated Planning/Self

Occupation
 Financial Advising

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2015

Transaction ID : A132D5E2C74FA48A7B38

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Adam N. Boyd
 Mailing Address 304 New Bern Avenue

City	State	Zip Code
Black Mountain	NC	28711-3333

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Camp Merri-Mac

Occupation
 Owners

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2015

Transaction ID : A5E01A6F09D31417BAF3

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
Richard Pollard
 Mailing Address 2427 Overhill Road

City	State	Zip Code
Charlotte	NC	28211-2125

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Carolina Medical Center

Occupation
 Anesthesiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2015

Transaction ID : A14D43B16EAB340FD9F6

Amount of Each Receipt this Period

2700.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4700.00